

042004

**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 251354US2SRD DIV

First Inventor or Application Identifier Koichi KONDO

Title APPARATUS AND METHOD FOR OBTAINING SHAPE DATA OF ANALYTIC SURFACE APPROXIMATE EXPRESSION

U.S. PTO
10/387254

042004

PTO

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents

| | | |
|---|--------------|----|
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g. PTO/SB/17) (Submit an original and a duplicate for fee processing) | | |
| 2. <input checked="" type="checkbox"/> Specification | Total Sheets | 41 |
| 3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) | Total Sheets | 17 |
| 4. <input checked="" type="checkbox"/> Oath or Declaration | Total Pages | 2 |
| a. <input type="checkbox"/> Newly executed (original or copy) | | |
| b. <input checked="" type="checkbox"/> Copy from a prior application (37 C.F.R. §1.63(d)) (for continuation/divisional with box 17 completed) | | |
| i. <input type="checkbox"/> DELETION OF INVENTOR(S) <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §1.63(d)(2) and 1.33(b).</small> | | |
| 5. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) | | |
| 6. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> | | |
| a. <input type="checkbox"/> Computer Readable Form (CRF) | | |
| b. Specification or Sequence Listing on : | | |
| i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or | | |
| ii. <input type="checkbox"/> Paper | | |
| c. <input type="checkbox"/> Statements verifying identity of above copies | | |

ADDRESS TO: Commissioner for Patents
Mail Stop Patent Application
Alexandria, Virginia 22313

22553
10/387254**ACCOMPANYING APPLICATION PARTS**

- 7. Assignment Recorded at Reel/Frame: 011659/0400
- 8. Application Data Sheet. See 37 CFR 1.76
- 9. 37 C.F.R. §3.73(b) Statement
(when there is an assignee) Power of Attorney
- 10. English Translation Document (*if applicable*)
- 11. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations
- 12. Preliminary Amendment
- 13. White Advance Serial No. Postcard
- 14. Certified Copy of Priority Document(s)
(if foreign priority is claimed)
- 15. Applicant claims small entity status.
See 37 CFR 1.27
- 16. Other: Request for Priority

17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below:

Continuation Divisional Continuation-in-part (CIP) of prior application no.: 09/817,148

Prior application information: Examiner: McCARTNEY, L. T. Group Art Unit: 2671

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18. CORRESPONDENCE ADDRESS

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| Name: Eckhard H. Kuesters | Registration No.: 28,870 |
| Signature: <i>Katherine D. Pauley</i> | Date: 4/20/04 |
| Name: Katherine D. Pauley | Registration No.: 50,607 |



13281

Docket No. 251354US2SRD DIV

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR(S) Koichi KONDO

SERIAL NO: New DIV Application

FILING DATE: Herewith

FOR: APPARATUS AND METHOD FOR OBTAINING SHAPE DATA OF ANALYTIC SURFACE APPROXIMATE EXPRESSION

FEE TRANSMITTAL

COMMISSIONER FOR PATENTS
ALEXANDRIA, VIRGINIA 22313

| FOR | NUMBER FILED | NUMBER EXTRA | RATE | CALCULATIONS |
|--|--------------|--------------|-----------------------------|--------------|
| TOTAL CLAIMS | 9 - 20 = | 0 | x \$18 = | \$0.00 |
| INDEPENDENT CLAIMS | 3 - 3 = | 0 | x \$86 = | \$0.00 |
| <input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS (If applicable) | | | + \$290 = | \$0.00 |
| <input type="checkbox"/> LATE FILING OF DECLARATION | | | + \$130 = | \$0.00 |
| | | | BASIC FEE | \$770.00 |
| | | | TOTAL OF ABOVE CALCULATIONS | \$770.00 |
| <input type="checkbox"/> REDUCTION BY 50% FOR FILING BY SMALL ENTITY | | | | \$0.00 |
| <input type="checkbox"/> FILING IN NON-ENGLISH LANGUAGE | | | + \$130 = | \$0.00 |
| <input type="checkbox"/> RECORDATION OF ASSIGNMENT | | | + \$40 = | \$0.00 |
| | | | TOTAL | \$770.00 |

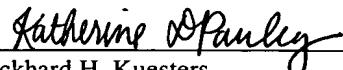
Please charge Deposit Account No. 15-0030 in the amount of **\$0.00** A duplicate copy of this sheet is enclosed.

A check in the amount of **\$0.00** to cover the filing fee is enclosed.

Credit card payment form is attached to cover the filing fee in the amount of **\$770.00**

The Director is hereby authorized to charge any additional fees which may be required for the papers being filed herewith and for which no check or credit card payment is enclosed herewith, or credit any overpayment to Deposit Account No. 15-0030. A duplicate copy of this sheet is enclosed.

Respectfully Submitted,

OBOLON, SPIVAK, McCLELLAND,
MAIER & NEUSTADT, P.C.Date: 4/20/04

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